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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of 10/145,997 05/15/2002 ABN
 which is a CIP of 09/895,750 06/29/2001 ABN

*CWA***** FOREIGN APPLICATIONS ********CWA*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 11/19/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	TN	2	5	1
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TITLE

Disposable menstrual undergarment

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
RECEIVED 375	No. _____ for following:	<input type="checkbox"/> 1.16 Fees (Filing)
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